

Public Health Update December 29, 2011

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Dr. Sheila Pinette Director, Maine CDC

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Salmonella

The US Department of Agriculture's Food Safety and Inspection Service (FSIS), working with US CDC and its state health partners, determined that there is a link between recalled Hannaford ground beef products and an outbreak of salmonellosis in several northeastern states. Four cases were identified in Maine. FSIS is continuing to work with US CDC, public health partners in the affected states, and the company on the investigation.

Consumption of food contaminated with Salmonella can cause salmonellosis, one of the most common bacterial foodborne illnesses. Salmonella infections can be life-threatening, especially to those with weak immune systems, such as infants, the elderly, and persons with HIV infection or those undergoing chemotherapy. The most common manifestations of salmonellosis are diarrhea, abdominal cramps, and fever within 12 to 72 hours. Additional symptoms may be chills, headache, nausea and vomiting that can last up to seven days. Individuals concerned about an illness should contact a health care provider.

This outbreak strain of Salmonella is resistant to many commonly prescribed antibiotics and its resistance can increase the risk of hospitalization or possible treatment failure in infected individuals.

To prevent foodborne illness, take the following precautions:

- Wash hands with warm, soapy water for at least 20 seconds before and after handling raw meat and poultry. Also wash cutting boards, dishes and utensils with hot soapy water. Clean up spills right away.
- Keep raw meat, fish and poultry away from other food that will not be cooked. Use separate cutting boards for raw meat, poultry and egg products and cooked foods.
- Cook raw meat and poultry to safe internal temperatures before eating. The safe internal temperature for meat such as beef and pork is 160° F, and 165° F for poultry, as determined with a food thermometer.
- Refrigerate raw meat and poultry within two hours after purchase (one hour if temperatures exceed 90° F). Refrigerate cooked meat and poultry within two hours after cooking.

For more information: http://go.usa.gov/Nov

Influenza update

The first laboratory-confirmed case of seasonal flu was reported to Maine CDC on December 23. Influenza A (2009 H1N1), influenza A (H3), and influenza B are all circulating nationally. For more information, see the Health Alert issued Dec. 27: http://go.usa.gov/No5

Maine CDC reminds everyone to take everyday preventive measures against the flu:

- Wash your hands frequently
- · Cough and sneeze into your elbow or shoulder
- Stay home when you feel sick
- Get vaccinated you can search for flu clinics by county at http://www.211maine.org/flu-clinics/ or by zipcode at www.flu.gov

Weekly updates on flu activity are available online:

• for Maine: http://go.usa.gov/NoK

• for the US: http://go.usa.gov/ITB

• for the world: http://go.usa.gov/ITK

Influenza A(H3N2)v

Maine CDC investigated two cases of influenza A(H3N2)v in October. For more information about this investigation, see the Health Alert issued Oct. 19: http://go.usa.gov/NoR

For current guidance and information from US CDC:

- Interim guidance for influenza surveillance: http://go.usa.gov/Non
- Interim guidance on case definitions to be used for investigations of influenza A(H3N2)v virus cases: http://go.usa.gov/NoU
- Interim guidance on specimen collection, processing, and testing for patients with suspect influenza A(H3N2)v virus infection: http://go.usa.gov/NoP
- Prevention strategies for seasonal and influenza A(H3N2) in health care settings: http://go.usa.gov/NoE

Vaccination

Maine CDC recommends that Health Care Providers continue vaccinating to protect against influenza this year according to the following guidelines:

Health Care Providers **should** use state-supplied vaccine for patients in the following circumstances:

- The patient is a child ages 6 months through 18 years;
- The patient is pregnant or the partner of a pregnant patient;
- The patient's insurance does not cover vaccinations;
- The patient is uninsured.

Health Care Providers may use state-supplied vaccine for other patients only if:

- The Health Care Provider has already vaccinated all eligible patients listed above and has excess statesupplied vaccine; and
- Privately purchased vaccine is not available.

Providers may not charge for state-supplied vaccine. It is reasonable and allowable to charge an administration fee in some circumstances, provided that:

- 1. MaineCare-eligible children are not charged an out of pocket administration fee;
- 2. administration fees do not exceed the regional Medicare maximum (\$14.37/vaccine administration); and
- 3. no one is denied vaccine because of their inability to pay an administration fee.

New latent TB treatment

Treatment of latent TB Infection greatly reduces the risk that TB infection will progress to TB disease. Certain groups are at very high risk of developing TB disease once infected. Every effort should be made to begin appropriate treatment and to ensure completion of the entire course of treatment for latent TB infection.

A significant new latent TB infection treatment regimen is now available, cutting doses from 270 to 12 and making latent TB treatment easier than ever before.

For more information:

http://www.cdc.gov/tb/topic/treatment/ltbi.htm

Birth Defects Prevention Month

Maine 8th healthiest state

The 22nd edition of America's Health Rankings® was released December 6. Maine is currently ranked 8th healthiest state in the nation, the same as last year.

These rankings are used to stimulate action by individuals, elected officials, medical professionals, public health professionals, employers, educators and communities to improve the health of the population of the U.S.

For more information, visit: http://www.americashealthrankings.org/

January is Birth Defects Prevention Month. Major birth defects are conditions that cause structural changes in one or more parts of the body; are present at birth; and have a serious, adverse effect on health, development, or functional ability.

About one in every 33 babies is born with a birth defect. Birth defects are a leading cause of infant death, accounting for more than 1 of every 5 infant deaths. In addition, babies born with birth defects have a greater chance of illness and long term disability than babies without birth defects.

Not all birth defects can be prevented. But a woman can increase her own chance of having a healthy baby. Many birth defects happen very early in pregnancy, sometimes before a woman even knows she is pregnant. Remember that about half of all pregnancies are unplanned. Here are some steps a woman can take to get ready for a healthy pregnancy:

- Take a vitamin with 400 micrograms (mcg) of folic acid every day.
- Avoid alcohol, tobacco, and street drugs.
- Keep hands clean by washing them often with soap and water to
- prevent infections.
- See a health care professional regularly.
- Talk with the health care professional about any medical problems and medicine use (both prescription and over-the-counter).
- Ask about avoiding any substances at work or at home that might be harmful to a developing baby.
- Eat a healthy, balanced diet.
- Avoid unpasteurized (raw) milk and foods made from it.
- Avoid eating raw or under cooked meat.

While pregnant, keep up these healthy habits, get early prenatal care, and go to every appointment. For more information about preventing birth defects, visit: http://www.cdc.gov/ncbddd/birthdefects/index.html

January 8-14 is Folic Acid Awareness Week. CDC urges women to take 400 mcg of folic acid every day, starting at least one month before getting pregnant, to help prevent major birth defects of the baby's brain and spine by 50% to 70%. Folic acid is a B vitamin our bodies use to make new cells. Everyone needs folic acid. For more information, visit: http://www.cdc.gov/ncbddd/folicacid/index.html

Hepatitis B and Diabetes

The Advisory Committee on Immunization Practices (ACIP) recommends hepatitis B vaccination for all unvaccinated adults with diabetes ages 19 through 59. ACIP recommends that hepatitis B vaccination may be administered at the discretion of the treating clinician to unvaccinated adults with diabetes age 60 and older. These recommendations are based on available information about HBV risk, morbidity and mortality, available vaccines, age at diagnosis of diabetes, and cost-effectiveness.

For more information, see this MMWR: http://go.usa.gov/Nsa

Quit Smoking for the New Year

As the New Year begins, resolve to make 2012 the year that you quit smoking. The New Year is a symbol of renewal and can be a time to prepare for new beginnings. It is a time to set goals and make them public so that you can get support and encouragement from friends and family. Many smokers use the New Year's holiday as motivation to quit. For some, this is the first time they've tried to quit; for others, they may have tried before. Regardless, this may be the most important resolution a smoker ever makes.

Local help is available to help you quit for good this year through www.thequitlink.com or calling 1-800-207-1230.

Disease Surveillance Reports

The following updated disease surveillance reports have been posted on the Maine CDC website:

- November Monthly Update for HIV and STD: http://go.usa.gov/NsT
- Detailed quarterly report on HIV for the first three quarters of the year (January 1-September 30): http://go.usa.gov/Nsb
- Detailed quarterly report on chlamydia and gonorrhea for the first three quarters of the year (January 1-September 30): http://go.usa.gov/Nsj
- Pertussis Surveillance Report 2010: http://go.usa.gov/NsD
- Selected Reportable Diseases in Maine Year-To-Date (YTD) Through November 2011: http://go.usa.gov/NsW

SmokefreeTXT

The National Cancer Institute has launched SmokefreeTXT, a free text message cessation service that provides 24/7 encouragement, advice, and tips to teens trying to quit smoking. For more information: http://go.usa.gov/5Sd

Once they sign up, teens receive text messages timed according to their selected quit date. Following their quit date, they will continue receiving texts for up to six weeks — a critical piece of the SmokefreeTXT service, as research shows that cessation support continues to be important beyond the first few weeks of quitting. Teens can sign up online at teen.smokefree.gov or text QUIT to iQUIT (47848).

Retirements and longevity awards

Maine CDC recently hosted a recognition ceremony and potluck luncheon for employees who retired in 2011 and those who received the Governor's Longevity Award.

Several Maine CDC programs are already missing their retirees, along with their 582 years of combined institutional knowledge. Twenty-two employees retired, each with between 9 and 39 years of service – Jeremy Black (12), Tamy Colfer (31), Karen Damren (31), Michaelynn Cecire (22), Patricia Chasse (19), Ed Collins (31), Brenda Corkum (29), Lynn Dugal (32), Jeff Folger (32), Pamela Harpine (34), Theresa Hilton (32), Sharron Hinckley (22), Elana Jellison (24), Suzanne LeDoux (9), Christina Mitchell (26), Janet Morrissette (26), Linda Pelkey (33), Bonnie Purington (12), Jacqueline Roberson (25), Carolyn Sloat (39), Tina White (25) and Lorraine Wilson (36).

Seven employees received the Governor's Longevity Award for 25 or more years of service to the State of Maine – Carol Boynton (35), Ed Collins (30), Pam Correll (30), Tammy Duguay (25), Randi Gallagher (25), Sheila Piper (25) and Lori Webber (25).

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Follow Maine CDC's Social Media Updates:

- Facebook (<u>www.facebook.com/MaineCDC</u>)
- Twitter (http://twitter.com/MEPublicHealth)
- Blog (http://mainepublichealth.blogspot.com)

Maine CDC wishes everyone a happy and safe new year!

You may subscribe to these updates for free through an RSS feed at http://www.maine.gov/tools/whatsnew/rss.php?tid=1049. In Internet Explorer and Firefox, you will be prompted to Subscribe to the Feed and then select the folder where feeds are stored.

For clinical consultation and outbreak management guidance, call Maine CDC's toll-free 24-hour phone line: 1-800-821-5821